



HOC
Academy

EARLY PRE



**JUNE 3RD-
AUGUST
13TH**

summer CAMP

- ✓ **Petting zoos**
- ✓ **Water and foam days**
- ✓ **RC Jugglers**
- ✓ **DJ Dance parties**

Registration → \$10
(Seperate from tuition)



PERMISSIONS & UNDERSTANDINGS

PLEASE READ ALL THE PERMISSIONS AND UNDERSTANDINGS. THEN SIGN AT THE END. THESE WILL COVER ALL ACTIVITIES FOR THE SUMMER.

Payments

A summer camp charge of \$10 will be added to your tuition account. This will cover all activities we have planned for the summer. If you would like to pay your summer tuition upfront with your camp fee, we offer a 1 week credit. Please see or email Ms. Kari for more information. This will be due May 20th. I understand that I will pay for tuition as discussed and scheduled and will give 2 weeks notice if I decide to adjust my schedule or remove my child(ren) from care.

PERMISSIONS & UNDERSTANDINGS CONTINUED

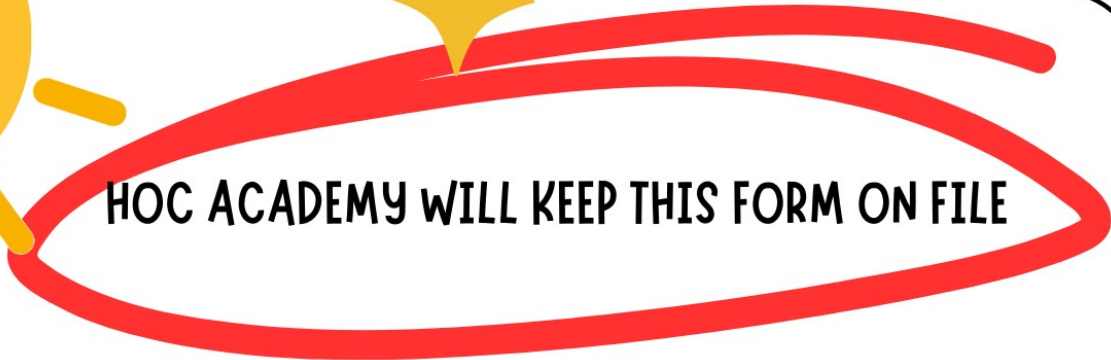
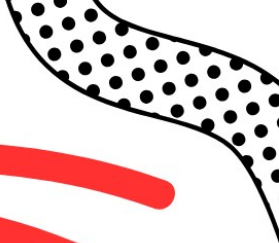
PLEASE READ ALL THE PERMISSIONS AND UNDERSTANDINGS. THEN SIGN AT THE END. THESE WILL COVER ALL ACTIVITIES FOR THE SUMMER.

SUNSCREEN

I GIVE MY PERMISSION FOR HOC TEACHERS TO APPLY SUNSCREEN TO MY CHILD EVERY DAY. I UNDERSTAND THAT HOC WILL PROVIDE BANANA BOAT OR EQUATE SPF 50 SUNSCREEN.
INITIAL: _____

BUG SPRAY

I GIVE MY PERMISSION FOR HOC TEACHERS TO APPLY THE BUG SPRAY THAT I PROVIDE TO MY CHILD EVERY DAY AS NEEDED. ALTHOUGH HOC IS COMMITTED TO APPLYING THE BUG SPRAY. I ACKNOWLEDGE THAT MY CHILD MAY STILL GET BITTEN. HOC IS NOT RESPONSIBLE FOR ANY BUG BITES OR RESULTS THEREAFTER.
INITIAL: _____



HOC ACADEMY WILL KEEP THIS FORM ON FILE

MY CHILD _____ WILL ATTEND HOC THE
FOLLOWING TIMES/DAYS IN THE SUMMER:



Monday	Tuesday	Wednesday	Thursday	Friday

WE EXPECT TO BE ON VACATION THE WEEK(S) OF :



I AGREE TO ALL OF THE PREVIOUS STATEMENTS AND EXPECTATIONS. I UNDERSTAND THAT MY CHILD MUST HAVE PROPER SUPPLIES TO PARTICIPATE SAFELY IN DAILY ACTIVITIES. I GIVE MY PERMISSION FOR MY CHILD TO PARTICIPATE IN ALL IN HOUSE AND ON SITE ACTIVITIES LISTED ON THE CALENDAR. I UNDERSTAND THAT ANYTHING ADDITIONAL WILL BE A SEPERATE PERMISSION.



PARENT NAME: _____ DATE: _____

PARENT SIGNATURE: _____



SUPPLY LISTS



DAILY

- BAG TO STORE ITEMS
(PLASTIC BAGS ARE NOT ALLOWED)
- WATER BOTTLE
- BUG SPRAY
- 2 FULL CHANGES OF CLOTHES

* CLOSED TOE SHOES ARE REQUIRED FOR SAFE DAILY PARTICIPATION*



WATER DAY

- BATHING SUIT
- TOWEL
- WATER SHOES
- SUNSCREEN AND
BUG SPRAY
APPLIED PRIOR TO
ARRIVAL